

General Assembly

Amendment

February Session, 2000

LCO No. 4148

Offered by:

REP. EBERLE, 15th Dist.

To: Subst. House Bill No. 5792

File No. **369**

Cal. No. 316

"An Act Making Technical And Other Changes To Certain Public Health Statutes."

- 1 Before line 1, insert the following and renumber the remaining
- 2 sections accordingly:
- 3 "Section 1. Subsection (a) of section 17a-210 of the general statutes is
- 4 repealed and the following is substituted in lieu thereof:
- 5 (a) There shall be a Department of Mental Retardation. The
- 6 Department of Mental Retardation, with the advice of a Council on
- 7 Mental Retardation, shall be responsible for the planning,
- 8 development and administration of complete, comprehensive and
- 9 integrated state-wide services for persons with mental retardation and
- 10 persons medically diagnosed as having Prader-Willi syndrome. The
- 11 Department of Mental Retardation shall be under the supervision of a
- 12 Commissioner of Mental Retardation, who shall be appointed by the
- 13 Governor in accordance with the provisions of sections 4-5 to 4-8,
- 14 inclusive. The Council on Mental Retardation may advise the
- 15 Governor on the appointment. The commissioner shall be a person
- 16 who has background, training, education or experience ir

administering programs for the care, training, education, treatment and custody of persons with mental retardation. The commissioner shall be responsible, with the advice of the council, for planning and developing complete, comprehensive and integrated state-wide services for persons with mental retardation; for the implementation and where appropriate the funding of such services; and for the coordination of the efforts of the Department of Mental Retardation with those of other state departments and agencies, municipal governments and private agencies concerned with and providing services for persons with mental retardation. The commissioner shall be responsible for the administration and operation of the state training school, state mental retardation regions and all state-operated community-based residential facilities established for the diagnosis, and training of persons with mental retardation. The commissioner shall be responsible for establishing standards, providing technical assistance and exercising the requisite supervision of all state-supported residential, day and program support services for persons with mental retardation and work activity programs operated pursuant to section 17a-226. The commissioner shall conduct or monitor investigations into allegations of abuse and neglect and file reports as requested by state agencies having statutory responsibility the conduct and oversight of such investigations. The commissioner shall stimulate research by public and private agencies, institutions of higher learning and hospitals, in the interest of the elimination and amelioration of retardation and care and training of persons with mental retardation.

- Sec. 2. Subsection (b) of section 19a-77 of the general statutes is repealed and the following is substituted in lieu thereof:
- 45 (b) For registration and licensing requirement purposes, child day 46 care services shall not include such services which are:
- (1) (A) Administered by a public school system, or (B) administered by a municipal agency or department and located in a public school building;

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50 (2) Administered by a private school which is in compliance with 51 section 10-188 and is approved by the State Board of Education or is 52 accredited by an accrediting agency recognized by the State Board of 53 Education;

- (3) Recreation operations such as but not limited to creative art studios for children that offer parent-child recreational programs and classes in music, dance, drama and art that are no longer than two hours in length, library programs, boys' and girls' clubs, church-related activities, scouting, camping or community-youth programs;
- (4) Informal arrangements among neighbors or relatives in their own homes, provided the relative is limited to any of the following degrees of kinship by blood or marriage to the child being cared for or to the child's parent: Child, grandchild, sibling, niece, nephew, aunt, uncle or child of one's aunt or uncle;
- (5) Drop-in supplementary child care operations for educational or
 recreational purposes and the child receives such care infrequently
 where the parents are on the premises; or
 - (6) Drop-in supplementary child care operations in retail establishments where the parents are on the premises for retail shopping, in accordance with section 19a-77a, as amended, provided that the drop-in supplementary child-care operation does not charge a fee and does not refer to itself as a child day care center.
- Sec. 3. Section 19a-84 of the general statutes is repealed and the following is substituted in lieu thereof:
 - (a) When the Commissioner of Public Health has reason to believe any person licensed under sections 19a-77 to 19a-80, inclusive, and 19a-82 to 19a-87, inclusive, has failed substantially to comply with the regulations adopted under said sections, [he] the commissioner may notify [said] the licensee in writing of [his] the commissioner's intention to suspend or revoke the license or to impose a licensure action. Such notice shall be served by certified mail stating the

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particular reasons for the proposed action. The [license applicant or license holder licensee may, if aggrieved by such intended action, make application for a hearing in writing over [his] the licensee's signature to the commissioner. The [aggrieved person] licensee shall state in the application in plain language the reasons why [he] the licensee claims to be aggrieved. The application shall be delivered to the [Commissioner of Public Health] commissioner within thirty days of the [aggrieved person's] licensee's receipt of notification of the intended action. The commissioner shall thereupon hold a hearing within sixty days from receipt [thereof] of such application and shall, at least ten days prior to the date of such hearing, mail a notice, giving the time and place [thereof] of the hearing, to [such aggrieved person] the licensee. The hearing may be conducted by the commissioner or by a hearing officer appointed by the commissioner in writing. The [license applicant or] licensee and the commissioner or hearing officer may issue subpoenas requiring the attendance of witnesses. The [license applicant or] licensee shall be entitled to be represented by counsel and a transcript of the hearing shall be made. If the hearing is conducted by a hearing officer, [he] the hearing officer shall state [his] the hearing officer's findings and make a recommendation to the commissioner on the issue of revocation [and] or suspension or the intended [licensure denial or] licensure action. The commissioner, based upon [said] the findings and recommendation of the hearing officer, or after a hearing conducted by [him] the commissioner, shall render [his] the commissioner's decision in writing suspending, revoking or continuing [said] the license or regarding the intended [licensure denial or] licensure action. A copy of the decision shall be sent by certified mail to the [license applicant or] licensee. The decision revoking or suspending the license or a decision imposing a licensure action shall become effective thirty days after it is mailed by registered or certified mail to the licensee. A [license applicant or] licensee aggrieved by the decision of the commissioner may appeal as provided in section 19a-85.

(b) The provisions of this section shall not apply to the denial of an

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initial application for a license under sections 19a-77 to 19a-80,

- inclusive, and 19a-82 to 19a-87, inclusive, provided the commissioner
- shall notify the applicant of any such denial and the reasons for such
- denial by mailing written notice to the applicant at the applicant's
- 119 address shown on the license application.
- Sec. 4. Section 19a-87e of the general statutes is repealed and the following is substituted in lieu thereof:
- 122 (a) The Commissioner of Public Health [shall have the discretion to] 123 may refuse to license under section 19a-87b, as amended, a person to 124 own, conduct, operate or maintain a family day care home, as defined 125 in section 19a-77, or to suspend or revoke the license or take any other 126 action that may be set forth in regulation that may be adopted 127 pursuant to section 19a-79 if the person who owns, conducts, 128 maintains or operates the family day care home, or a person employed 129 [therein] in such family day care home in a position connected with the 130 provision of care to a child receiving child day care services, has been 131 convicted, in this state or any other state of a felony, as defined in 132 section 53a-25, involving the use, attempted use or threatened use of 133 physical force against another person, or has a criminal record in this 134 state or any other state that the commissioner reasonably believes 135 renders the person unsuitable to own, conduct, operate or maintain or 136 be employed by a family day care home, or if such persons or a person 137 residing in the household has been convicted in this state or any other 138 state of cruelty to persons under section 53-20, injury or risk of injury 139 to or impairing morals of children under section 53-21, abandonment 140 of children under the age of six years under section 53-23, or any 141 felony where the victim of the felony is a child under eighteen years of 142 age, a violation of section 53a-70, as amended, 53a-70a, as amended, 143 53a-70b, 53a-71, 53a-72a, 53a-72b, as amended, or 53a-73a, illegal 144 manufacture, distribution, sale, prescription, dispensing 145 administration under section 21a-277 or 21a-278, or illegal possession 146 under section 21a-279, or if such person, or a person employed 147 [therein] in such family day care home in a position connected with the 148 provision of care to a child receiving child day care services, either fails

to substantially comply with the regulations adopted pursuant to 149 150 section 19a-87b, as amended, or conducts, operates or maintains the 151 home in a manner which endangers the health, safety and welfare of 152 the children receiving child day care services. [However, no] Any 153 refusal of a license pursuant to this section shall be rendered [except] 154 in accordance with the provisions of sections 46a-79 to 46a-81, 155 inclusive. Any person whose license has been revoked pursuant to this 156 section shall be ineligible to apply for a license for a period of one year 157 from the effective date of revocation.

- (b) When the [Commissioner of Public Health] commissioner intends to [refuse a license or to] suspend or revoke a license or take any other action against a license set forth in regulation adopted pursuant to section 19a-79, [he] the commissioner shall notify the [license applicant or license holder] licensee in writing of [his] the commissioner's intended action. The [license applicant or license holder licensee may, if aggrieved by such intended action, make application for a hearing in writing over [his] the licensee's signature to the commissioner. The [aggrieved person] licensee shall state in the application in plain language the reasons why [he] the licensee claims to be aggrieved. The application shall be delivered to the [Commissioner of Public Health] commissioner within thirty days of the [aggrieved person's] licensee's receipt of notification of the intended action. The commissioner shall thereupon hold a hearing within sixty days from receipt [thereof] of such application and shall, at least ten days prior to the date of such hearing, mail a notice, giving the time and place [thereof] of the hearing, to [such aggrieved person] the licensee. The provisions of this subsection shall not apply to the denial of an initial application for a license under section 19a-87b, as amended, provided the commissioner shall notify the applicant of any such denial and the reasons for such denial by mailing written notice to the applicant at the applicant's address shown on the license application.
- 181 (c) Any person who is licensed to conduct, operate or maintain a 182 family day care home shall notify the commissioner of any conviction

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of the owner, conductor, operator or maintainer of the family day care home or of any person residing in the household or any person employed [therein] in such family day care home in a position connected with the provision of care to a child receiving child day care services, of a crime which affects the commissioner's discretion under subsection (a) of this section, immediately upon obtaining knowledge of such conviction. Failure to comply with the notification requirement of this subsection may result in the suspension or revocation of the license or [take] the taking of any other action against a license set forth in regulation adopted pursuant to section 19a-79 and shall subject the licensee to a civil penalty of not more than one hundred dollars per day for each day after the person obtained knowledge of the conviction.

- (d) It shall be a class A misdemeanor for any person seeking employment in a position connected with the provision of care to a child receiving family day care home services to make a false written statement regarding prior criminal convictions pursuant to a form bearing notice to the effect that such false statements are punishable, which statement [he] <u>such person</u> does not believe to be true and is intended to mislead the prospective employer.
- (e) Any person having reasonable cause to believe that a family day care home, as defined in section 19a-77, is operating without a current and valid license or in violation of the regulations adopted under section 19a-87b, as amended, or in a manner which may pose a potential danger to the health, welfare and safety of a child receiving child day care services, may report such information to any office of the Department of Public Health. The department shall investigate any report or complaint received pursuant to this subsection. The name of the person making the report or complaint shall not be disclosed unless (1) such person consents to such disclosure, (2) a judicial or administrative proceeding results [therefrom] from such report or complaint. All records obtained by the department in connection with any such investigation

217 shall not be subject to the provisions of section 1-210, as amended, for a 218 period of thirty days from the date of the petition or other event 219 initiating such investigation, or until such time as the investigation is 220 terminated pursuant to a withdrawal or other informal disposition or 221 until a hearing is convened pursuant to chapter 54, whichever is 222 earlier. A formal statement of charges issued by the department shall 223 be subject to the provisions of section 1-210, as amended, from the time 224 that it is served or mailed to the respondent. Records which are 225 otherwise public records shall not be deemed confidential merely 226 because they have been obtained in connection with an investigation 227 under this section."

- After line 16, insert the following and renumber the remaining sections accordingly:
- "Sec. 6. Subsection (b) of section 19a-195a of the general statutes is repealed and the following is substituted in lieu thereof:
- 232 (b) The commissioner shall adopt regulations, in accordance with 233 the provisions of chapter 54, to (1) provide for state-wide 234 standardization of certification for ["emergency medical technician-235 intermediate"] each class of (A) emergency medical technicians, 236 including, but not limited to, paramedics, (B) emergency medical 237 services instructors, and (C) medical response technicians, (2) allow 238 course work for such certification to be taken state-wide, and (3) allow 239 persons so certified to perform within their scope of certification state-240 wide."
- Strike out lines 125 to 430, inclusive, in their entirety and insert the following in lieu thereof:
- "Sec. 10. Section 38a-488a of the general statutes, as amended by section 27 of public act 99-284, is repealed and the following is substituted in lieu thereof:
- (a) Each individual health insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section

38a-469 delivered, issued for delivery, renewed, amended or continued in this state on or after January 1, 2000, shall provide benefits for the diagnosis and treatment of mental or nervous conditions. For the purposes of this section, "mental or nervous conditions" means mental disorders, as defined in the most recent edition of the American Psychiatric Association's "Diagnostic and Statistical Manual of Mental Disorders". "Mental or nervous conditions" does not include (1) mental retardation, (2) learning disorders, (3) motor skills [disorder] disorders, (4) communication disorders, (5) caffeine-related disorders, (6) relational problems, and (7) additional conditions that may be a focus of clinical attention, that are not otherwise defined as mental disorders in the most recent edition of the American Psychiatric Association's "Diagnostic and Statistical Manual of Mental Disorders".

- (b) No such policy shall establish any terms, conditions or benefits that place a greater financial burden on an insured for access to diagnosis or treatment of mental or nervous conditions than for diagnosis or treatment of medical, surgical or other physical health conditions.
- (c) In the case of benefits payable for the services of a licensed physician, such benefits shall be payable for the same services when such services are lawfully rendered by a psychologist licensed under the provisions of chapter 383 or by such a licensed psychologist in a licensed hospital or clinic.
 - (d) [(1)] In the case of benefits payable for the services of a licensed physician or psychologist, such benefits shall be payable for the same services when such services are rendered by:
- (1) [a] A clinical social worker who is licensed under the provisions of chapter 383b and who has passed the clinical examination of the American Association of State Social Work Boards and has completed at least two thousand hours of the post-master's social work experience in a nonprofit agency qualifying as a tax-exempt organization under Section 501(c) of the Internal Revenue Code of 1986 or any subsequent

corresponding internal revenue code of the United States, as from time

- 281 to time amended, in a municipal, state or federal agency or in an
- institution licensed by the Department of Public Health under section
- 283 19a-490; [. (2) In the case of benefits payable for the services of a
- licensed physician or psychologist, such benefits shall be payable for
- the same services when such services are rendered by
- 286 (2) [a] \underline{A} social worker who was certified as an independent social
- worker under the provisions of chapter 383b prior to October 1, 1990; [.
- 288 (3) In the case of benefits payable for the services of a licensed
- 289 physician or psychologist, such benefits shall be payable for the same
- 290 services when such services are rendered by]
- 291 (3) [a] A licensed marital and family therapist who has completed at
- 292 least two thousand hours of the post-master's marriage and family
- 293 therapy work experience in a nonprofit agency qualifying as a tax-
- 294 exempt organization under Section 501(c) of the Internal Revenue
- 295 Code of 1986 or any subsequent corresponding internal revenue code
- 296 of the United States, as from time to time amended, in a municipal,
- state or federal agency or in an institution licensed by the Department
- of Public Health under section 19a-490; [. (4) In the case of benefits
- 299 payable for the services of a licensed physician or psychologist, such
- 300 benefits shall be payable for the same services when such services are
- 301 rendered by]
- 302 (4) [a] A marital and family therapist who was certified under the
- provisions of chapter 383a prior to October 1, 1992; [. (5) In the case of
- 304 benefits payable for the services of a licensed physician or
- 305 psychologist, such benefits shall be payable for the same services when
- 306 such services are rendered by]
- 307 (5) [a] \underline{A} licensed alcohol and drug counselor, as defined in section
- 308 20-74s, as amended, or a certified alcohol and drug counselor, as
- 309 defined in section 20-74s, as amended; or
- 310 (6) A licensed professional counselor.

(e) For purposes of this section, the term "covered expenses" means the usual, customary and reasonable charges for treatment deemed necessary under generally accepted medical standards, except that in the case of a managed care plan, as defined in section 38a-478, "covered expenses" means the payments agreed upon in the contract between a managed care organization, as defined in section 38a-478, and a provider, as defined in section 38a-478.

- (f) (1) In the case of benefits payable for the services of a licensed physician, such benefits shall be payable for (A) services rendered in a child guidance clinic or residential treatment facility by a person with a master's degree in social work or by a person with a master's degree in marriage and family therapy under the supervision of a psychiatrist, physician, licensed marital and family therapist, or licensed clinical social worker who is eligible for reimbursement under subdivisions (1) to (4), inclusive, of subsection (d) of this section; (B) services rendered in a residential treatment facility by a licensed or certified alcohol and drug counselor who is eligible for reimbursement under subdivision (5) of subsection (d) of this section; or (C) services rendered in a residential treatment facility by a licensed professional counselor who is eligible for reimbursement under subdivision (d) of this section.
- (2) In the case of benefits payable for the services of a licensed psychologist under subsection (d) of this section, such benefits shall be payable for (A) services rendered in a child guidance clinic or residential treatment facility by a person with a master's degree in social work or by a person with a master's degree in marriage and family therapy under the supervision of such licensed psychologist, licensed marital and family therapist, or licensed clinical social worker who is eligible for reimbursement under subdivisions (1) to (4), inclusive, of subsection (d) of this section; [. (3) In the case of benefits payable for the services of a licensed physician, such benefits shall be payable for services rendered in a residential treatment facility by a licensed or certified alcohol and drug counselor who is eligible for reimbursement under subdivision (5) of subsection (d) of this section.

345 (4) In the case of benefits payable for the services of a licensed 346 psychologist under subsection (d) of this section, such benefits shall be 347 payable for (B) services rendered in a residential treatment facility by 348 a licensed or certified alcohol and drug counselor who is eligible for 349 reimbursement under subdivision (5) of subsection (d) of this section; 350 or (C) services rendered in a residential treatment facility by a licensed 351 professional counselor who is eligible for reimbursement under 352 subdivision (6) of subsection (d) of this section.

- (g) In the case of benefits payable for the service of a licensed physician practicing as a psychiatrist or a licensed psychologist, under subsection (d) of this section, such benefits shall be payable for outpatient services rendered (1) in a nonprofit community mental health center, as defined by the Department of Mental Health and Addiction Services, in a nonprofit licensed adult psychiatric clinic operated by an accredited hospital or in a residential treatment facility; (2) under the supervision of a licensed physician practicing as a psychiatrist, a licensed psychologist, a licensed marital and family therapist, a licensed clinical social worker, [or] a licensed or certified alcohol and drug counselor or a licensed professional counselor who is eligible for reimbursement under subdivisions (1) to [(5)] (6), inclusive, of subsection (d) of this section; and (3) within the scope of the license issued to the center or clinic by the Department of Public Health or to the residential treatment facility by the Department of Children and Families.
- (h) Except in the case of emergency services or in the case of services for which an individual has been referred by a physician affiliated with a health care center, nothing in this section shall be construed to require a health care center to provide benefits under this section through facilities that are not affiliated with the health care center.
- (i) In the case of any person admitted to a state institution or facility administered by the Department of Mental Health and Addiction Services, Department of Public Health, Department of Children and Families or the Department of Mental Retardation, the state shall have

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a lien upon the proceeds of any coverage available to such person or a

- legally liable relative of such person under the terms of this section, to
- the extent of the per capita cost of such person's care. Except in the case
- of emergency services, the provisions of this subsection shall not apply
- to coverage provided under a managed care plan, as defined in section
- 383 38a-478.
- Sec. 11. Section 38a-514 of the general statutes, as amended by
- 385 section 28 of public act 99-284, is repealed and the following is
- 386 substituted in lieu thereof:
- 387 (a) Except as provided in subsection (j) of this section, each group
- 388 health insurance policy, providing coverage of the type specified in
- 389 subdivisions (1), (2), (4), (11) and (12) of section 38a-469, delivered,
- issued for delivery, renewed, amended or continued in this state on or
- 391 after January 1, 2000, shall provide benefits for the diagnosis and
- 392 treatment of mental or nervous conditions. For the purposes of this
- 393 section, "mental or nervous conditions" means mental disorders, as
- 394 defined in the most recent edition of the American Psychiatric
- 395 Association's "Diagnostic and Statistical Manual of Mental Disorders".
- 396 "Mental or nervous conditions" does not include (1) mental
- retardation, (2) learning disorders, (3) motor skills [disorder] disorders,
- 398 (4) communication disorders, (5) caffeine-related disorders, (6)
- relational problems, and (7) additional conditions that may be a focus
- 400 of clinical attention, that are not otherwise defined as mental disorders
- 401 in the most recent edition of the American Psychiatric Association's
- 402 "Diagnostic and Statistical Manual of Mental Disorders".
- 403 (b) No such group policy shall establish any terms, conditions or
- 404 benefits that place a greater financial burden on an insured for access
- 405 to diagnosis or treatment of mental or nervous conditions than for
- 406 diagnosis or treatment of medical, surgical or other physical health
- 407 conditions.
- 408 (c) In the case of benefits payable for the services of a licensed
- 409 physician, such benefits shall be payable for the same services when

such services are lawfully rendered by a psychologist licensed under

- 411 the provisions of chapter 383 or by such a licensed psychologist in a
- 412 licensed hospital or clinic.
- (d) [(1)] In the case of benefits payable for the services of a licensed
- 414 physician or psychologist, such benefits shall be payable for the same
- services when such services are rendered by:
- 416 (1) [a] \underline{A} clinical social worker who is licensed under the provisions
- of chapter 383b and who has passed the clinical examination of the
- 418 American Association of State Social Work Boards and has completed
- at least two thousand hours of the post-master's social work experience
- 420 in a nonprofit agency qualifying as a tax-exempt organization under
- 421 Section 501(c) of the Internal Revenue Code of 1986 or any subsequent
- 422 corresponding internal revenue code of the United States, as from time
- 423 to time amended, in a municipal, state or federal agency or in an
- institution licensed by the Department of Public Health under section
- 425 19a-490; [. (2) In the case of benefits payable for the services of a
- 426 licensed physician or psychologist, such benefits shall be payable for
- 427 the same services when such services are rendered by
- 428 (2) [a] A social worker who was certified as an independent social
- worker under the provisions of chapter 383b prior to October 1, 1990; [.
- 430 (3) In the case of benefits payable for the services of a licensed
- 431 physician or psychologist, such benefits shall be payable for the same
- 432 services when such services are rendered by]
- 433 (3) [a] A licensed marital and family therapist who has completed at
- least two thousand hours of the post-master's marriage and family
- 435 therapy work experience in a nonprofit agency qualifying as a tax-
- 436 exempt organization under Section 501(c) of the Internal Revenue
- Code of 1986 or any subsequent corresponding internal revenue code
- of the United States, as from time to time amended, in a municipal,
- state or federal agency or in an institution licensed by the Department
- of Public Health under section 19a-490; [. (4) In the case of benefits
- 441 payable for the services of a licensed physician or psychologist, such

benefits shall be payable for the same services when such services are rendered by]

- 444 (4) [a] A marital and family therapist who was certified under the 445 provisions of chapter 383a prior to October 1, 1992; [. (5) In the case of 446 benefits payable for the services of a licensed physician or 447 psychologist, such benefits shall be payable for the same services when 448 such services are rendered by]
- 449 (5) [a] A licensed alcohol and drug counselor, as defined in section 450 20-74s, as amended, or a certified alcohol and drug counselor, as 451 defined in section 20-74s, as amended; or

452 (6) A licensed professional counselor.

- (e) For purposes of this section, the term "covered expenses" means the usual, customary and reasonable charges for treatment deemed necessary under generally accepted medical standards, except that in the case of a managed care plan, as defined in section 38a-478, "covered expenses" means the payments agreed upon in the contract between a managed care organization, as defined in section 38a-478, and a provider, as defined in section 38a-478.
- (f) (1) In the case of benefits payable for the services of a licensed physician, such benefits shall be payable for (A) services rendered in a child guidance clinic or residential treatment facility by a person with a master's degree in social work or by a person with a master's degree in marriage and family therapy under the supervision of a psychiatrist, physician, licensed marital and family therapist or licensed clinical social worker who is eligible for reimbursement under subdivisions (1) to (4), inclusive, of subsection (d) of this section; (B) services rendered in a residential treatment facility by a licensed or certified alcohol and drug counselor who is eligible for reimbursement under subdivision (5) of subsection (d) of this section; or (C) services rendered in a residential treatment facility by a licensed professional counselor who is eligible for reimbursement under subdivision (6) of subsection (d) of this section.

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(2) In the case of benefits payable for the services of a licensed psychologist under subsection (d) of this section, such benefits shall be payable for (A) services rendered in a child guidance clinic or residential treatment facility by a person with a master's degree in social work or by a person with a master's degree in marriage and family therapy under the supervision of such licensed psychologist, licensed marital and family therapist or licensed clinical social worker who is eligible for reimbursement under subdivisions (1) to (4), inclusive, of subsection (d) of this section; [. (3) In the case of benefits payable for the services of a licensed physician, such benefits shall be payable for services rendered in a residential treatment facility by a licensed or certified alcohol and drug counselor who is eligible for reimbursement under subdivision (5) of subsection (d) of this section. (4) In the case of benefits payable for the services of a licensed psychologist under subsection (d) of this section, such benefits shall be payable for (B) services rendered in a residential treatment facility by a licensed or certified alcohol and drug counselor who is eligible for reimbursement under subdivision (5) of subsection (d) of this section; or (C) services rendered in a residential treatment facility by a licensed professional counselor who is eligible for reimbursement under subdivision (6) of subsection (d) of this section.

(g) In the case of benefits payable for the service of a licensed physician practicing as a psychiatrist or a licensed psychologist, under subsection (d) of this section, such benefits shall be payable for outpatient services rendered (1) in a nonprofit community mental health center, as defined by the Department of Mental Health and Addiction Services, in a nonprofit licensed adult psychiatric clinic operated by an accredited hospital or in a residential treatment facility; (2) under the supervision of a licensed physician practicing as a psychiatrist, a licensed psychologist, a licensed marital and family therapist, a licensed clinical social worker, [or] a licensed or certified alcohol and drug counselor, or a licensed professional counselor who is eligible for reimbursement under subdivisions (1) to [(5)] (6), inclusive, of subsection (d) of this section; and (3) within the scope of

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the license issued to the center or clinic by the Department of Public Health or to the residential treatment facility by the Department of Children and Families.

- (h) Except in the case of emergency services or in the case of services for which an individual has been referred by a physician affiliated with a health care center, nothing in this section shall be construed to require a health care center to provide benefits under this section through facilities that are not affiliated with the health care center.
- (i) In the case of any person admitted to a state institution or facility administered by the Department of Mental Health and Addiction Services, Department of Public Health, Department of Children and Families or the Department of Mental Retardation, the state shall have a lien upon the proceeds of any coverage available to such person or a legally liable relative of such person under the terms of this section, to the extent of the per capita cost of such person's care. Except in the case of emergency services the provisions of this subsection shall not apply to coverage provided under a managed care plan, as defined in section 38a-478.
- (j) A group health insurance policy may exclude the benefits required by this section if such benefits are included in a separate policy issued to the same group by an insurance company, health care center, hospital service corporation, medical service corporation or fraternal benefit society. Such separate policy, which shall include the benefits required by this section and the benefits required by section 38a-533, <u>as amended</u>, shall not be required to include any other benefits mandated by this title.
- (k) In the case of benefits based upon confinement in a residential treatment facility, such benefits shall be payable only in situations in which (A) the insured has a serious mental illness which substantially impairs the person's thought, perception of reality, emotional process, or judgment or grossly impairs behavior as manifested by recent disturbed behavior, (B) the insured has been confined in a hospital for

such illness for a period of at least three days immediately preceding such confinement in a residential treatment facility, and (C) such illness would otherwise necessitate continued confinement in a hospital if such care and treatment were not available through a residential treatment center for children and adolescents.

- (l) The services rendered for which benefits are to be paid for confinement in a residential treatment facility must be based on an individual treatment plan. For purposes of this section, the term "individual treatment plan" means a treatment plan prescribed by a physician with specific attainable goals and objectives appropriate to both the patient and the treatment modality of the program."
- After line 505, insert the following and renumber the remaining sections accordingly:
 - "Sec. 16. (NEW) (a) As used in this section, "emergency medical technician" means (1) any class of emergency medical technician certified under regulations adopted pursuant to section 19a-179 of the general statutes, including, but not limited to, any emergency medical technician-intermediate, (2) any medical response technician certified under such regulations, and (3) any paramedic licensed pursuant to section 20-206ll of the general statutes.
 - (b) Any emergency medical technician who has been trained, in accordance with national standards recognized by the Commissioner of Public Health, in the administration of epinephrine using automatic prefilled cartridge injectors or similar automatic injectable equipment and who functions in accordance with written protocols and the standing orders of a licensed physician serving as an emergency department director may administer epinephrine using such injectors or equipment. All emergency medical technicians shall (1) receive such training, (2) be equipped with epinephrine in such injectors or equipment and with an automatic external defibrillator, and (3) be capable of providing such epinephrine at the scene of each call to which the emergency medical technician responds."